PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

09974 - 5028-01

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER SMALL	
TOTAL CLAIMS								RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			minus 20≃		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		*			X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PI			RESENT					+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in o						column 2	1	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II								TOTAL		Jon	OTHER	THAN
	_	(Column 1)		(Colun		(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME.	Independent	*	Minus	***		<u> </u> =		X43=		OR	X86=	
L	FIRST PRESE	NTATION OF MU	LTIPLE DEPENDENT		CLAIM	1		+145=		OR.	+290=	
							L	TOTAL		OB	TOTAL	
	(Column 1) (Column 2) (Column 3					(Column 3)	/	ADDIT. FEE			ADDIT. FEE	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
								TOTAL DDIT. FEE		OB	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID F	BER ÚSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RÄTE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
\ME	Independent	*	Minus	***		=		X43=	•	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145= TOTAL		OR	+290=	
**	f the "Highest Nui	mber Previously Pa mber Previously Pa	id For" IN THIS	S SPACE is	less thai	n 20, enter "20."	Α	DDIT. FEE	·	OR ,	TOTAL ADDIT. FEE	
		ber Previously Paid					r four	nd in the app	ropriate box	in col	umn 1.	